



THOMAS L. GARTHWAITE, M.D.
Director and Chief Medical Officer

FRED LEAF
Chief Operating Officer

COUNTY OF LOS ANGELES
DEPARTMENT OF HEALTH SERVICES
313 N. Figueroa, Los Angeles, CA 90012
(213) 240-8101

BOARD OF SUPERVISORS

Gloria Molina
First District

Yvonne Brathwaite Burke
Second District

Zev Yaroslavsky
Third District

Don Knabe
Fourth District

Michael D. Antonovich
Fifth District

December 8, 2003

TO: Each Supervisor

FROM: Thomas L. Garthwaite, MD
Director and Chief Medical Officer

SUBJECT: CMS VALIDATION SURVEY OF KING-DREW MEDICAL CENTER

As your offices were previously informed, last week State inspectors on behalf of the Centers for Medicare and Medicaid Services (CMS) began a four-day review of King-Drew Medical Center (KDMC). The validation survey was to determine whether KDMC is in compliance with the rules for participation in the Medicare and Medicaid programs. The State inspectors concluded their fieldwork late Friday and DHS representatives had a brief exit conference with them regarding their preliminary finds. The State will complete their report and forward it to CMS by December 13. Some of the findings relayed by the inspectors to DHS are of a serious nature. These include:

Quality Assurance Program

The inspectors noted that while the facility has a valid quality assurance plan in place, it does not appear that the facility is following through on the plan. There is not adequate follow-up on identified QA problems or remediation of identified issues.

Nursing

The inspectors expressed that fundamental expectations for nursing care were not being met. This includes a serious lack of adequate initial assessment, on-going assessment and pain assessment. There were also a number of errors and omissions in the patient records that were reviewed. The findings related to patient records might trigger additional actions by the State and/or CMS.

Medical Staff

The inspectors noted the Professional Staff Association bylaws were not being followed in terms of reporting to the Governing Body. Additionally, and similar to the issues identified in the Quality Assurance Program, there was a lack of follow-up and documentation related to identified problems.

Governing Body

The inspectors relayed that, because of the failure of the institution to follow the reporting structures within the approved bylaws, it is likely that the Governing Body will be cited for lack of appropriate oversight.

Additionally, the inspectors triggered the Federal Food and Drug Administration (FDA) doing a site inspection. The inspectors spent several hours at the facility last week. The exact nature of their review is unknown.

NEXT STEPS

It is anticipated that CMS will issue a final report on their findings in January. In the interim, DHS staff has begun to address the issues that were identified in the exit conference. As part of the on-going efforts to strengthen the management and oversight of KDMC, DHS is reassigning staff from throughout the Department to work on these specific issues. We will advise your offices of the progress being made on this front and provide your offices with final CMS report when it is issued.

If you need any additional information, please contact me.

TLG:jw

c: Chief Administrative Officer
County Counsel
Executive Officer, Board of Supervisors